

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	SD NO.	DATE
FEE DETERMINATION	E.H.	✓	04/19/01
O.I.P.E. CLASSIFIER	MD	529	5/10
FORMALITY REVIEW			6/11/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 - ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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H.S.  
 6.12.01